



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 03142/100G877-US2																
In re Application of Deguang Zhu et al.																		
Application Number 09/748,466-Conf. #3400		Filed December 26, 2000																
For: NEW USES OF INSULIN AND PANCREATIN																		
Art Unit 1616		Examiner M. Lamm																
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$</td><td></td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$</td><td>420.00</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$</td><td></td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$</td><td></td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$</td><td></td></tr></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 210.00</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 41,151</p> <p>_____ December 17, 2003 Date</p> <p>_____ (212) 527-7765 Telephone Number</p> <p>_____ Jay P. Lessler Typed or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</p> <p><input type="checkbox"/> Total of 1 forms are submitted.</p>				<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$		<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	420.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$		<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$		<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$																	
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	420.00																
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$																	
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$																	
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$																	

12/23/2003 RXNDASF1 00000095 09748466

02 FC:2252

210.00 CP

Express Mail Label No.	Dated: _____
------------------------	--------------